 P 811Q

MARATHON SCHOOL

61-25 Marathon Parkway

 Little Neck, New York, 11362

718-224-8060 Fax 718-224-5914

[www.811Q.weebly.com](http://www.811Q.weebly.com)

Independence-Collaboration-Technology-Communication

 Nicole Avila

 **Principal Assistant Principals**

**Elementary Offsites:** PS 69, P 147, P 822 Johnnie Bradford III

**Intermediate Offsites:** PS/MS 147IS 227 Yvette Miguez

**High School Offsites:** Bayside HS, Francis Lewis HS, QHST Katis Romig

**District 75 Community-Based Instruction**

**Parent Consent**

Dear \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 A critical component of all programs in District 75 is community-based instruction (CBI). These instructional activities give students the opportunity to learn and practice important skills in community settings. Your son/daughter

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_will participate in many experiences outside the classroom under the supervision of a teacher, paraprofessional and/or related service provider. The activities are directly related to the goals and objectives of your child’s IEP. Your child’s educational program at P811Q will include instruction in the following type of locations in both the home and school communities:

 \_\_\_ Community Service Locations (e.g., post office, public library, firehouse)

 \_\_\_ Recreational Locations (e.g., neighborhood walks, schoolyard, park, YMCA)

 \_\_\_ Community Agency Locations (e.g., AHRC, ACRMD, FEGS, Urban Center)

 \_\_\_ Educational Locations (e.g., universities, colleges, public schools)

 \_\_\_ Stores/Retail Locations (e.g., grocery store, shoe store, drug store)

 \_\_\_ Health Care Locations (e.g., hospitals, nursing homes)

 \_\_\_ Business Locations (e.g., telephone company, hotel, power company)

Transportation

 \_\_\_school bus or van \_\_\_subway \_\_\_public bus \_\_\_walk

Student Supports (money, special clothing, materials that may be needed by the student)

If you have any questions about any of this information, please call the school at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and ask for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give my permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_of class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to participate in the Community-Based Instruction program as it has been described above.

Signature of Parent or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_